Dear Teacher,	
	has been referred for counseling and/or other
behavioral supports.	We are collecting data on the referred students to determine
• •	ogram and to help us determine what their needs will be. Please ed form for this student and add the requested attachments
We truly appreciate	your assistance.
Sincerely,	

Student's Legal Full Name:		Birthdate
Address	Parent Name(s) _	
Phone Numbers (please list any numbers you have)		
Please summarize the concerns you have about this stue emotional status (attach additional pages if needed):	ident in school in t	terms of behavior, social skills,
Please summarize the concerns you are aware of regard	ding the student at	home and in the community:

Has this student been receiving counseling?	_ From whom?			
Are any other agencies involved with this student?	Which agencies?			
Is this student receiving special education?	_			
What supports do you think this student will need to be needed and explain where appropriate)	successful next year? (please check all that are			
☐ Individual counseling				
☐ Group counseling				
\square Group social skills and independent living skills inst	ruction			
\Box Family services (support to the family regarding how understanding the student's problems, etc.)	to get needed services, how to parent the student,			
$\hfill \Box$ One-on-one support in the classroom (an assistant to him/her regarding appropriate behavior) Please specify				
\square Crisis management (individual support when the stud	dent is having a behavioral crisis)			
☐ Other (please explain)				
Please complete the attached BASC.				
ATTACH				
☐ The completed BASC				
☐ A printout of test scores from TestVue				
\square A printout of discipline records from SASI and Power	erSchool for this year			
☐ Any anecdotal records, behavioral records, and/or data from a behavior plan that you may have				
\square Anything else you have regarding this student that yo	ou think may be helpful!!!!!			

THANKS FOR YOUR HELP!!!!!!!